

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

Ms.

Mr. Artist

NORMAN TREPAL

(Last Name Last)

Permanent Address

Street

DR. RICHARD H. TREPAL

CITY

22117

Tel. () 261-1363

Zip

Area Code

Temporary Address

Street

CITY

Tel. ()

Zip

Area Code

Permanent address is in what county? CUYAHOGA

Born in Cuyahoga County Yes No

Collaborator

(If Any)

If entries are not accepted or not sold:

Artist will pick up entries at Museum.

Museum should dispose of entries.

Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

Norman Trepal

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

SILVER PRINT

Title

PORTRAIT

Price or NFS	Insurance Value If NFS Only	Size
✓	25.00	7x13

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Frame

DO NOT WRITE IN THIS SECTION

369(3)

ACCEPTED

REJECTED

FEE PAID

BY

3/23

ABL

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

SILVER PRINT

norman trepal

Title

MUSIC I

Price or NFS	Insurance Value If NFS Only	Size
25.00		10x12

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price of Frame
NO		

DO NOT WRITE IN THIS SECTION

370(3) 160

ACCEPTED

REJECTED

RECEIVED

BY

3/23

ABL

DO NOT DETACH

1974 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	NORMAN TREPAC
Address	1854 SUNSET DR.
City & State	Richmond Hts. OHIO Zip 44117

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH 

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

SILVER PRINT

6/22/74 Anthony L. Tropel

Title

PORTRAIT

DO NOT WRITE IN THIS SECTION

369(3)

ACCEPTED

REJECTED 

DO NOT DETACH 

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Medium or Materials

SILVER PRINT

Title

MUSIC I

DO NOT WRITE IN THIS SECTION

370(3)

ACCEPTED

REJECTED 